

FILED/ACCEPTED

DEC - 3 2010

Federal Communications Commission  
Office of the Secretary

**Florida Administrative Code**

**Rule Title: Lifeline Service**

**Department: PUBLIC SERVICE COMMISSION**

**Division: Departmental**

**Chapter: TELEPHONE COMPANIES**

**Effective Date: 6/23/2010**

**History Notes: Specific Authority 350.127(2), 364.0252, 364.10(3)(j) FS. Law Implemented 364.0252, 364.10, 364.105, 364.183(1) FS. History—New 1-2-07, Amended 12-6-07, 6-23-10.**

**References in this version: No reference(s).**

**25-4.0665 Lifeline Service.**

(1) A subscriber is eligible for Lifeline service if:

(a) The subscriber is a participant in one of the following federal assistance programs:

1. Medicaid;
2. Food Stamps;
3. Supplemental Security Income (SSI);
4. Temporary Assistance for Needy Families/Temporary Cash Assistance;
5. "Section 8" Federal Public Housing Assistance;
6. Low-Income Home Energy Assistance Program; or
7. The National School Lunch Program – Free Lunch; or

(b) The subscriber's eligible telecommunications carrier has more than one million access lines and the subscriber's household income is at or below 150 percent of the federal poverty income guidelines.

(2) A subscriber living on federally recognized Tribal lands who does not satisfy the eligibility requirements for Lifeline service in subsection (1) of this rule is nevertheless eligible for Lifeline service if the subscriber receives benefits from one of the following Bureau of Indian Affairs programs:

- (a) Tribal temporary assistance for needy families (TANF);
- (b) NSL Program – Free Lunch; or
- (c) Head Start.

(3) Eligible telecommunications carriers with less than one million access lines are not required to enroll Lifeline applicants through the income eligibility test of 150 percent or less of the federal poverty income guidelines, but may do so voluntarily.

(4) Eligible telecommunications carriers that charge an initial connection charge must offer Link-Up service to subscribers who are eligible for Lifeline service pursuant to this rule.

(5) When enrolling customers in the Lifeline service program under paragraph (1)(a) of this rule, eligible telecommunications carriers shall accept Form PSC/RAD 157 (6/10), entitled "Application for Link-Up Florida and Lifeline Assistance," which is incorporated into this rule by reference and can be accessed from the Commission's website at [www.floridapsc.com](http://www.floridapsc.com), by selecting "Link-Up Florida and Lifeline," then selecting "Need Discounted Phone Service?," and then selecting "English Link-Up and Lifeline Certification Form" (also available in Spanish and Creole).

(6) Eligible telecommunications carriers shall enroll customers for Lifeline service who electronically submit Form PSC/RAD 158 (6/10), entitled "Lifeline and Link-Up Florida On-line Self Certification Form," which is incorporated into this rule by reference and can be accessed from the Commission's website at [www.floridapsc.com](http://www.floridapsc.com), by selecting "Link-Up Florida and Lifeline," then selecting "Apply On-line."

(7) For Lifeline applicants who do not use On-line enrollment or simplified certification enrollment, the eligible telecommunications carrier must accept Public Assistance eligibility determination letters, including those provided for food stamps, Medicaid, and public housing lease agreements, as proof of eligibility for Link-Up and Lifeline enrollment.

(8) Eligible telecommunications carriers must allow customers the option to submit Link-Up or Lifeline applications via U.S. Mail or facsimile, and may allow applications to be submitted electronically. Eligible telecommunications carriers must also allow customers the option to submit copies of supporting documents via U.S. Mail or facsimile.

(9) Eligible telecommunications carriers shall only require a customer to provide the last four digits of the customer's social security number for application for Lifeline and Link-Up service and to verify continued eligibility for the programs as part of the

annual verification process.

(10) All eligible telecommunications carriers shall participate in the Lifeline service Automatic Enrollment Process. For purposes of this rule, the Lifeline service Automatic Enrollment Process is an electronic interface between the Department of Children and Family Services, the Commission, and the eligible telecommunications carrier that allows low-income individuals to automatically enroll in Lifeline following enrollment in a qualifying public assistance program.

(a) The Commission shall send an e-mail to the eligible telecommunications carrier informing the eligible telecommunications carrier that Lifeline service applications are available for retrieval for processing.

(b) The eligible telecommunications carrier shall enroll the subscriber in the Lifeline service program as soon as practicable, but no later than 60 days from the receipt of the e-mail notification. Upon completion of initial enrollment, the eligible telecommunications carrier shall credit the subscriber's bill for Lifeline service as of the date the eligible telecommunications carrier received the e-mail notification from the Commission.

(c) The eligible telecommunications carrier shall maintain a current e-mail address with the Commission, which the Commission will use to inform the eligible telecommunications carrier of the Commission's Lifeline secure website address and that new Lifeline service applications are available for retrieval for processing.

(d) The eligible telecommunications carrier shall maintain with the Commission the names, e-mail addresses and telephone numbers of one primary and one secondary company representative who will manage the user accounts on the Commission's Lifeline secure website.

(e) Within 20 calendar days of receiving the Commission's e-mail notification that the Lifeline service application is available for retrieval, the eligible telecommunications carrier shall provide a facsimile response to the Commission via the Commission's dedicated Lifeline service facsimile telephone line at (850)413-7142, or an electronic response via the Commission's Lifeline secure website, identifying the customer name, address, telephone number, and date of the application for:

1. Misdirected Lifeline service applications;
2. Applications for customers currently receiving Lifeline service; and
3. Rejected applicants, which shall include the reason(s) why the applicants were rejected.

In lieu of a facsimile or electronic submission, the eligible telecommunications carrier may file the information with the Office of Commission Clerk.

(f) Pursuant to Section 364.107(1), F.S., information filed by the eligible telecommunications carrier in accordance with paragraph (9)(e) of this rule is confidential and exempt from Section 119.07(1), F.S. However, the eligible telecommunications carrier may disclose such information consistent with the criteria in Section 364.107(3)(a), F.S. For purposes of this rule, the information filed by the eligible telecommunications carrier will be presumed necessary for disclosure to the Commission pursuant to the criteria in Section 364.107(3)(a)4., F.S.

(11) An eligible telecommunications carrier shall not impose additional verification requirements on subscribers beyond those which are required by this rule.

(12) If the Office of Public Counsel certifies a subscriber eligible to receive Lifeline service under the income test set forth in Section 364.10(3)(a), F.S., an eligible telecommunications carrier shall not impose any additional verification requirements on the subscriber.

(13) An eligible telecommunications carrier must provide written notice to a customer within 30 days of receipt of the application providing the reason for a rejected Lifeline application, and providing contact information for the customer to get information regarding the application denial.

(14) An eligible telecommunications carrier must provide 60 days written notice prior to the termination of Lifeline service. The notice of pending termination shall contain the telephone number at which the subscriber can obtain information about the subscriber's Lifeline service from the eligible telecommunications carrier. The notice shall also inform the subscriber of the availability, pursuant to Section 364.105, F.S., of discounted residential basic local telecommunications service.

(15) If a subscriber's Lifeline service is terminated and the subscriber subsequently presents proof of Lifeline eligibility, the eligible telecommunications carrier shall reinstate the subscriber's Lifeline service as soon as practicable, but no later than 60 days following receipt of proof of eligibility. Irrespective of the date on which the eligible telecommunications carrier reinstates the subscriber's Lifeline service, the subscriber's bill shall be credited for Lifeline service as of the date the eligible telecommunications carrier received the proof of continued Lifeline eligibility.

(16) All eligible telecommunications carriers shall provide current Lifeline service company information to the Universal

Service Administrative Company at [www.lifelinesupport.org](http://www.lifelinesupport.org) so that the information can be posted on the Universal Service Administrative Company's consumer website.

(17) Eligible telecommunications carriers must advertise the availability of Lifeline service to those who may be eligible for the service. At a minimum, if the eligible telecommunications carrier publishes a directory, the eligible telecommunications carrier must include in the index of the directory a notice of the availability of Lifeline service. If the eligible telecommunications carrier generates customer bills, the eligible telecommunications carrier must also place an insert in the subscriber's bill or a message on the subscriber's bill at least once each calendar year advising subscribers of the availability of Lifeline service.

(18) Eligible telecommunications carriers may not charge a service deposit in order to initiate Lifeline service if the subscriber voluntarily elects toll blocking or toll control. If the subscriber elects not to place toll blocking or toll control on the line, an eligible telecommunications carrier may charge a service deposit.

(19) Eligible telecommunications carriers may not charge Lifeline subscribers a monthly number-portability charge.

(20) Eligible telecommunications carriers offering Link-Up and Lifeline service must submit quarterly reports to the Commission no later than 30 days following the ending of each quarter as follows: First Quarter (January 1 through March 31); Second Quarter (April 1 through June 30); Third Quarter (July 1 through September 30); Fourth Quarter (October 1 through December 31). The quarterly reports shall include the following data:

- (a) The number of Lifeline subscribers, excluding resold Lifeline subscribers, for each month during the quarter;
- (b) The number of subscribers who received Link-Up for each month during the quarter;
- (c) The number of new Lifeline subscribers added each month during the quarter;
- (d) The number of transitional Lifeline subscribers who received discounted service for each month during the quarter; and
- (e) The number of residential access lines with Lifeline service that were resold to other carriers each month during the quarter.

*Rulemaking Authority 120.80(13)(d), 350.127(2), 364.0252, 364.10(3)(j) FS. Law Implemented 364.0252, 364.10, 364.105, 364.183(1) FS. History—New 1-2-07, Amended 12-6-07, 6-23-10.*

**Florida Administrative Code**

**Rule Title: Eligibility Determination Process**

**Department: DEPARTMENT OF CHILDREN AND FAMILY SERVICES**

**Division: Economic Self-Sufficiency Program**

**Chapter: PUBLIC ASSISTANCE PROGRAMS**

**Effective Date: 7/1/2010**

**History Notes: Specific Authority 414.095, 414.45 FS. Law Implemented 409.903, 409.904, 409.919, 414.045, 414.095, 414.31, 414.41 FS. History—New 4-9-92, Amended 11-22-93, 8-3-94, Formerly 10C-1.205, Amended 11-30-98, 9-27-00, 7-29-01, 9-12-04, 9-11-08, 7-1-10.**

**References in this version: No reference(s).**

**65A-1.205 Eligibility Determination Process.**

(1) The individual completes a Department application for assistance to the best of the individual's ability using either the ACCESS Florida Application, CF-ES 2337, 05/2010, incorporated by reference, or an ACCESS Florida Web Application (only accepted electronically), CF-ES 2353, 03/2008, incorporated by reference in Rule 65A-1.400, F.A.C., and submits it. An application must include at least the individual's name, address and signature to initiate the application process. An eligibility specialist determines the eligibility of each household member for public assistance. An applicant can withdraw the application at any time without affecting their right to reapply at any time.

(a) The Department must determine an applicant's eligibility initially at application and if the applicant is determined eligible, at periodic intervals thereafter. It is the applicant's responsibility to keep appointments with the eligibility specialist and furnish information, documentation and verification needed to establish eligibility. If the Department schedules a telephonic appointment, it is the Department's responsibility to be available to answer the applicant's phone call at the appointed time. If the information, documentation or verification is difficult for the applicant to obtain, the eligibility specialist must provide assistance in obtaining it when requested or when it appears necessary.

(b) Time standards for processing applications vary by public assistance program in accordance with 7 C.F.R. § 273.2(g), 45 C.F.R. § 206.10(a)(3)(i) and 42 C.F.R. § 435.911. For Food Assistance and Cash Assistance Programs, time standards begin the date following the date the application was filed and end on the date the Department makes benefits available or mails a notice concerning eligibility. For the Medicaid Program, the time standard ends on the date the Department mails an eligibility notice. The Department must process and determine eligibility within the following time frames:

<u>Program:</u>	<u>Application Processing Time Standards:</u>
Expedited Food Assistance	7 days
Food Assistance	30 days
Temporary Cash Assistance, Refugee Assistance and Child In Care	45 days
Medical Assistance and State Funded Programs for individuals who apply on the basis of disability	90 days
For all other Medical Assistance and State Funded Programs for applicants on the basis of non-disability eligibility, including OSS, QMB, SLMB, and QII	45 days

All days counted after the date of application are calendar days. Applicant delay days do not count in determining compliance with the time standard. The Department uses information provided on the Screening for Expedited Medicaid Appointments form, CF-ES 2930, 04/2007, incorporated by reference, to expedite processing of Medicaid disability-related applications.

(c) If the eligibility specialist determines during the interview or at any time during the application process that the applicant must provide additional information or verification, or that a member of the assistance group must comply with Child Support Enforcement or register for employment services, the eligibility specialist must give the applicant written notice to provide the requested information or to comply, allowing ten calendar days from request or the interview, whichever is later. For all programs,

verifications are due ten calendar days from the date of written request or the interview, or 30 days from the date of application, whichever is later. In cases where the applicant must provide medical information, the return due date is 30 calendar days following the written request or the interview, or 30 days from the date of application, whichever is later. If the due date falls on a holiday or weekend, the deadline is the next working day. If the applicant does not provide required verifications or information by the deadline date the application will be denied, unless the applicant requests an extension or there are extenuating circumstances justifying an additional extension. The eligibility specialist makes the decision of whether to grant the request for extension. When the applicant provides all required information or verification, the eligibility specialist determines eligibility for the public assistance programs. If the eligibility criteria are met, benefits are authorized.

(d) In accordance with 42 C.F.R. § 435.911, unusual circumstances that might affect the timely processing of Medicaid applications include applicant delay, physician delay and emergency delay as defined below. Unusual circumstances are non-agency processing delays, and the calendar time passing during such delay(s) does not count as part of the 90-day time standard for determining the timeliness of Medicaid eligibility decisions based on disability.

1. Applicant delay is the time attributed to the applicant who does not keep any scheduled appointment or provide requested and required eligibility information or verification. Applicant delay begins the date the applicant does not keep a Department scheduled appointment with either the Department or health professionals and ends the date the applicant keeps that appointment as rescheduled; or, the date the applicant does not provide requested and required information for the initial interview and ends the date the applicant provides the information to the Department. The "Are You Disabled and Applying for Medicaid?" brochure, CF/PI 165-107, 06/2008, incorporated by reference, describes requested and required information for eligibility determination.

2. Physician delay is the time attributed to a physician for not providing requested medical evidence or conducting a medical examination timely. Physician delay begins ten days after the Department makes its initial request for medical evidence from the physician and ends the date the Department receives complete medical evidence that is responsive to the Department's request; or, fourteen days after the Department requests a medical examination and ends the date the Department receives the complete medical examination results.

3. Emergency delay is time attributed to other situations beyond the Department's control. These delays are situations such as disasters, unexpected office closure(s) and systems inaccessibility or unavailability. Emergency delay begins the day such an event occurs and ends the day the Department is able to resume application processing.

(2) In accordance with 7 C.F.R. § 273.14, 45 C.F.R. § 206.10(a)(9)(iii), 42 C.F.R. § 435.916, and Section 414.095, F.S., the Department must determine eligibility at periodic intervals.

(a) A complete eligibility review is the process of reviewing all factors related to continued eligibility of the assistance group.

(b) A partial eligibility review entails review of one or more, but not all factors of eligibility. The Department schedules partial reviews based on known facts or anticipated changes or when an unanticipated change occurs. It does not usually require an interview unless it cannot obtain the necessary information without the interview.

(3) The Department conducts phone or face-to-face interviews with applicants/recipients or their authorized/designated representatives when required for the application or complete eligibility review process. The Department conducts face-to-face interviews upon request in the ACCESS Florida office, the applicant's/recipient's home, or other agreed upon location. The applicant/recipient or their authorized/designated representative must keep the interview appointment or reschedule the missed appointment. The Department mails a notice of missed interview to food assistance households who miss an interview.

(4) If an applicant or recipient does not keep an appointment without arranging another time with the eligibility specialist; or does not sign and date the applications described in subsection (1); or does not submit required documentation or verification the Department will deny benefits as it cannot establish eligibility.

(5) The Department can substantiate, verify or document information provided by the applicant/recipient as part of each determination of eligibility. For any program, when there is a question about the validity of the information provided, the Department will ask for additional documentation or verification as required. The term verification is used generically to represent this process.

(a) Substantiation establishes accuracy of information by obtaining consistent, supporting information from the individual.

(b) Verification confirms the accuracy of information through a source(s) other than the individual. The Department can secure verification electronically, telephonically, in writing, or by personal contact.

(c) Documentation establishes the accuracy of information by obtaining and including in the case record an official document, official paper or a photocopy of such document or paper or electronic source that supports the statement(s) made by the individual.

(6) The Department conducts data exchanges with other agencies and systems to obtain information on each applicant and recipient. It uses data exchanges to validate or identify social security numbers, verify the receipt of benefits from other sources, verify reported information, and obtain previously unreported information.

(a) The Department conducts data exchanges with the Social Security Administration, Internal Revenue Service, Agency for Workforce Innovation, federal and state personnel and retirement systems, other states' public assistance files and educational institutions.

(b) The Department compares information found through the data exchanges with the information already on file. If the data exchange identifies new or different information than was previously available, the Department conducts a partial eligibility review to determine whether it must change benefit levels.

(c) The Department considers beneficiary and SSI benefit data from the Social Security Administration, unemployment compensation benefit data and Department of Health, Office of Vital Statistics data verified upon receipt and does not require third party verification. Other data requires third party verification before the Department takes adverse actions on a case.

(7) In accordance with Food Assistance Program waivers, food assistance applicants/recipients who have been interviewed, but do not return the requested verification by the deadline, can be denied prior to the 30th day. Face-to-face interviews are not required.

(8) The following forms, incorporated by reference, can be used in the eligibility determination process: Verification of Employment/Loss of Income, CF-ES 2620, 05/2010; Verification of Dependent Care Expenses, CF-ES 2621, 03/2010; Verification of Shelter Expenses, CF-ES 2622, 03/2010; School Verification, CF-ES 2623, 10/2005; and Work Calendar, CF-ES 3007, 10/2005. Copies of materials incorporated by reference are available from the ACCESS Florida Headquarters Office, 1317 Winewood Boulevard, Tallahassee, Florida 32399-0700 or on the Department's web site at <http://www.dcf.state.fl.us/dcf/forms/Search/DCFFormSearch.aspx>. The CF-ES 2353 is available on the Department's web site at <http://www.myflorida.com/accessflorida/>.

*Rulemaking Authority 409.919, 414.095, 414.45 FS. Law Implemented 409.903, 409.904, 409.919, 414.045, 414.095, 414.31, 414.41 FS. History—New 4-9-92, Amended 11-22-93, 8-3-94, Formerly 10C-1.205, Amended 11-30-98, 9-27-00, 7-29-01, 9-12-04, 9-11-08, 7-1-10.*

**Florida Administrative Code**

**Rule Title: Lifeline Service**

**Department: DEPARTMENT OF CHILDREN AND FAMILY SERVICES**

**Division: Economic Self-Sufficiency Program**

**Chapter: PUBLIC ASSISTANCE PROGRAMS**

**Effective Date: 2/3/2009**

**History Notes: Specific Authority Law Implemented 364.10 FS. History—New 2-3-09.**

**References in this version: No reference(s).**

**65A-1.206 Lifeline Service.**

(1) The Department participates in eligibility determinations for automatic Lifeline service enrollment. The automatic Lifeline service enrollment process is an electronic interface between the Department and the Public Service Commission. Applicants and recipients can indicate their interest in receiving Lifeline service within the ACCESS Florida Web Application, CF-ES 2353, 03/2008, incorporated by reference in Rule 65A-1.400, F.A.C. After being determined eligible for Food Assistance, Temporary Cash Assistance or Medicaid, the Department sends an electronic file to the Public Service Commission to ensure automatic enrollment with the appropriate eligible telecommunications carrier.

(2) The CF-ES 2353 is available on the Department's web site at <http://www.myflorida.com/accessflorida/>.

*Rulemaking Authority 364.10(3)(h)2. FS. Law Implemented 364.10 FS. History—New 2-3-09.*